

32501.032  
19.01.32.0026  
N00204.AR.000059  
NAS PENSACOLA  
5090.3a  
Code 11433/11

Mr. Bill Kellenberger  
Florida Department of Environmental Regulation  
Northwest District  
160 Governmental Center  
Pensacola, FL 32501-5794

29 MAR 1988

Subj: ABANDONMENT OF MONITOR WELLS AT THE WASTEWATER TREATMENT PLANT, NAS  
PENSACOLA, FL

Dear Mr. Kellenberger:

As indicated by our letter to you dated 10 March 1988, monitor wells at the wastewater treatment plant have been impacted by construction. On February 23, 1988, five monitor wells were abandoned at the above-referenced site to facilitate the construction of the new concrete tank that will replace the existing surge pond. The work was supervised by Geraghty & Miller, Inc., and performed immediately after the second RCRA quarterly groundwater sampling event.

At monitor well numbers DG-1, DG-2, and DG-6 (enclosure (1)), the stainless steel well casings and screens (average 10 feet deep) were pulled and removed from the ground. Subsequently, the boreholes collapsed to about 2 to 3 feet below land surface and were then filled with a neat cement to land surface.

At monitor cell numbers GM-74 and GM-75, the protective steel casings were removed and the PVC well casings were cut off below land surface. The wells were then filled with a neat cement slurry containing 5 percent bentonite using a tremie pipe placed at the bottom of the well.

Enclosure (2) is the well-abandonment permits and completion reports obtained from the Northwest Florida Water Management District in Pensacola, Florida.

Should you have questions concerning the information contained in this report, please call Mr. Mike Green at (863) 743-0574.

Sincerely,

09B  
114  
11433

114  
11433  
11433xms  
JD  
3/25/88

WANG 0451L  
Encl:

- (1) Locations of Monitor Wells
- (2) Well Abandonment Permits and Completion Reports

J. B. MALONE, JR.  
by direction

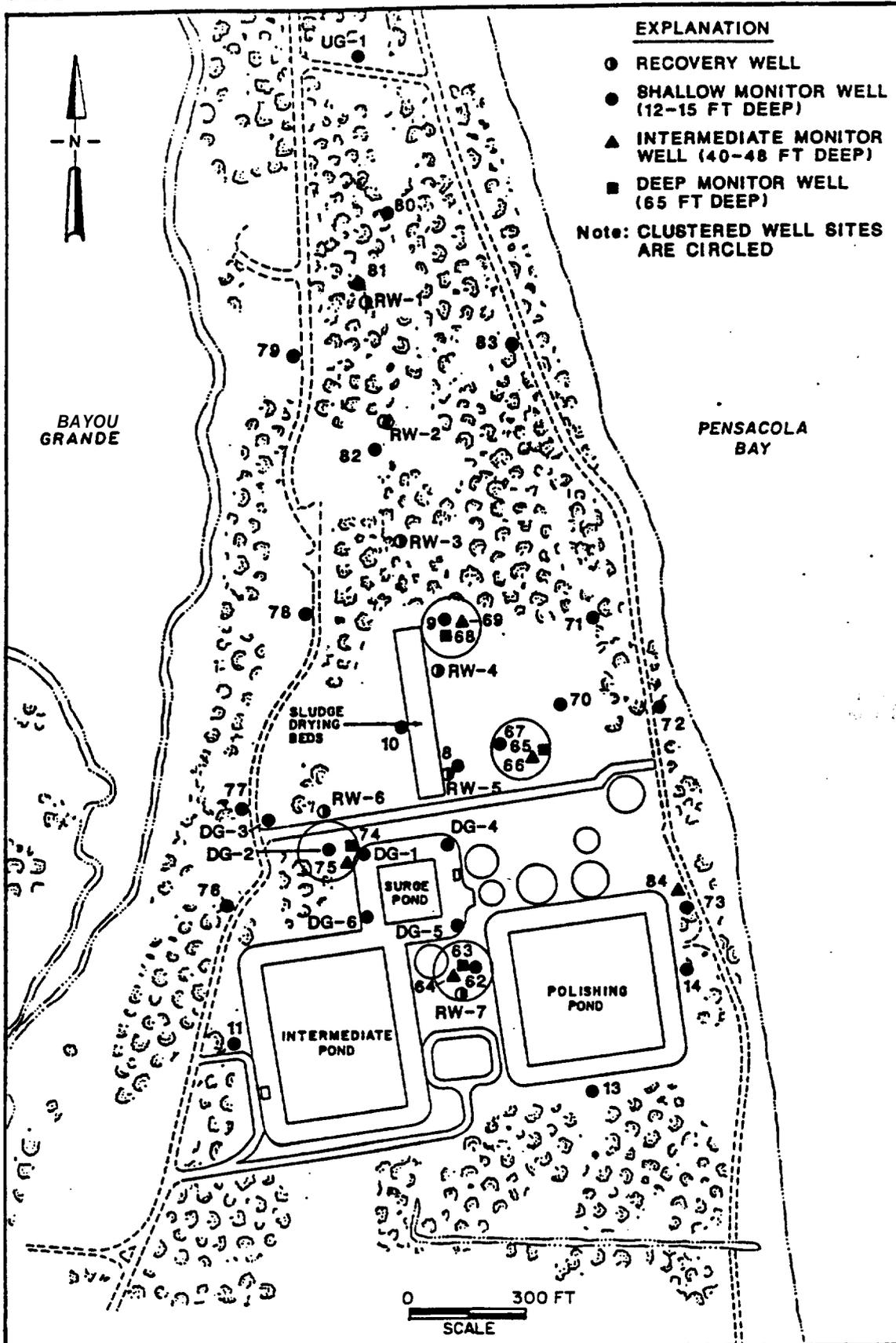
Copy to:  
NAS Pensacola, FL  
PKC Pensacola, FL

ATTACHMENT A

LOCATIONS OF MONITOR WELLS AT  
NAS PENSACOLA WASTEWATER  
TREATMENT PLANT

Sheet

Enc/ (1)



ATTACHMENT B  
WELL-ABANDONMENT PERMITS AND  
WELL-COMPLETION REPORTS

ENC1 (2)

Marianna Field Office  
300 Pelt Street  
Marianna, FL 32446  
(904) 482-4017

APPLICATION TO INSTRUCT, REPAIR, OR ABANDON A WELL

FIGURE #1

**NORTHWEST FLORIDA  
WATER MANAGEMENT DISTRICT**

Route 1, Box 3100, Havana, Florida 32333 (904) 487-1770

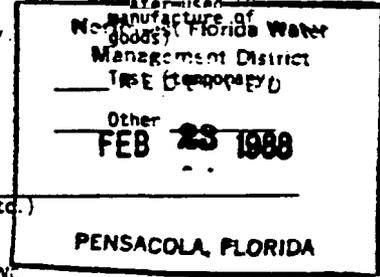
Pensacola Field Office  
Room 203  
160 Governmental Center  
Pensacola, FL 32501  
(904) 436-8465

TYPE OR PRINT IN BLACK INK

1. PUBLIC WORKS CENTER - NAS PENS 0096 3566 NAS, PENS 32508 452-4315  
OWNER, LEGAL NAME OF ENTITY IF CORPORATION ADDRESS ZIP TELEPHONE NUMBER

2. Check the Use of the Well

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Domestic (four dwellings or less)                  | <input type="checkbox"/> Landscape Irrigation  | <input type="checkbox"/> Sanitation (restrooms) | <input type="checkbox"/> Aquaculture (fish ponds)   |
| <input type="checkbox"/> Public Water Supply (DER)                          | <input type="checkbox"/> Agricultural Irrigation (crops, sod, orchards, nursery stock) | <input type="checkbox"/> Heat Pump/AC Supply    | <input type="checkbox"/> Industrial                 |
| <input type="checkbox"/> Community <input type="checkbox"/> Non-Community   | <input type="checkbox"/> Nursery Irrigation (retail outlets only)                      | <input type="checkbox"/> Heat Pump/K Return     | <input type="checkbox"/> Manufacture of goods       |
| <input type="checkbox"/> Other Public Supply (MRS)                          | <input type="checkbox"/> Golf Course Irrigation  | <input type="checkbox"/> Livestock              | <input type="checkbox"/> Manufacture of other goods |
| <input checked="" type="checkbox"/> Monitor (Describe Facility): <u>WWT</u> | <input type="checkbox"/> Recreation Area Irrigation (ball fields, playgrounds)         |   |   |



3. Description of Facility: WWT

(whether residential, townhouse, condo, number of persons/units served, kind of business, etc.)

4. Application for:

- New Construction  Repair  Abandonment
5. Casing: 2 Diameter 5' Approximate Depth
- Black Steel  PVC  Galvanized  Other (Specify) STAINLESS

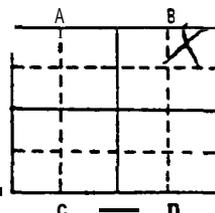
6. Pump Capacity 0 GPM 8. Screen: Length 5 Feet PVC Slot Size 0.01  Stainless 9. Proposed Grout Interval: 0 to 10 to

10. Method of Construction: Rotary  Cable Tool  Combination  Auger GRout Other

11. WWT - NAS, PENS Well Location: Address, Road Name or Number Draw map of well location and indicate well site with "X". Identify known roads and landmarks, provide distances.

12. Esc. County Subdivision Name, Lot, Block, Unit

13. Quarter Section B Indicate Well in Chart



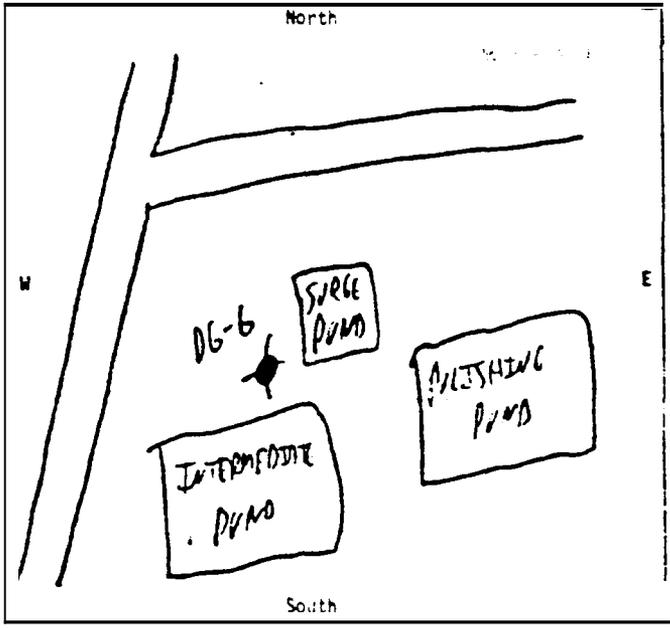
14. Section Township Range 1 35 30W

15. Minimum Distance from Septic Tank: — feet

16. On 6-inch wells & larger: Latitude Longitude

17. I HEREBY CERTIFY THAT I WILL COMPLY WITH THE RULES OF CHAPTER 40A-3, FLORIDA ADMINISTRATIVE CODE, AND THAT A WATER USE PERMIT OR ARTIFICIAL RECHARGE PERMIT, IF NEEDED, HAS OR WILL BE OBTAINED PRIOR TO COMMENCEMENT OF WELL CONSTRUCTION. I FURTHER CERTIFY THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS ACCURATE AND THAT I WILL OBTAIN NECESSARY APPROVAL FROM OTHER FEDERAL, STATE, OR LOCAL GOVERNMENTS, IF APPLICABLE. I AGREE TO PROVIDE A WELL COMPLETION REPORT TO THE DISTRICT WITHIN 15 DAYS OF EXPIRATION OF THE PERMIT.

Ralph Neal (MRS) 2491  
Signature of Contractor License No.



18. I CERTIFY THAT I AM THE OWNER OF THE PROPERTY, THAT THE INFORMATION PROVIDED ON WELL LOCATION IS ACCURATE, AND THAT I AM AWARE OF MY RESPONSIBILITIES UNDER CHAPTER 373, FLORIDA STATUTES, TO MAINTAIN OR PROPERLY ABANDON THIS WELL; or, I CERTIFY THAT I AM THE AGENT FOR THE OWNER, THAT THE INFORMATION PROVIDED IS ACCURATE, AND THAT I HAVE INFORMED THE OWNER OF HIS RESPONSIBILITIES AS STATED ABOVE.

Fee Received: \$ — Receipt No. — Check No. —  
Permit Number: SE020152 CUP Application No. —  
Geologist Approval: [Signature] CUP Permit No. — TP No. —  
Signature: [Signature] Authorized District Representative Date Granted: 2/23/88

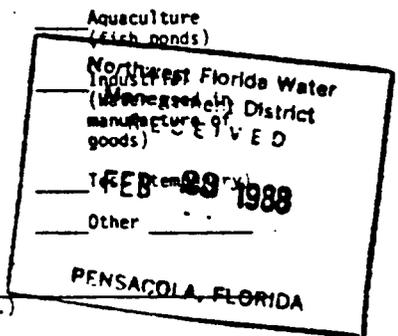
PERMIT CONDITIONS:  
Contact the Florida Department of Environmental Regulation (DER) for information on applicable construction and siting standards. The construction of this monitoring well is required to meet the applicable standards of DER.

TYPE OR PRINT IN BLACK INK

1. PUBLIC WORKS CENTER - MAS PENS RD 3500 MAS, PENS FL. 32508 452-4315  
 OWNER, LEGAL NAME OF ENTITY IF CORPORATION ADDRESS ZIP TELEPHONE NUMBER

2. Check the Use of the Well

- Domestic (four dwellings or less)
- Landscape Irrigation
- Sanitation (restrooms)
- Public Water Supply (DER)
- Agricultural Irrigation (crops, sod, orchards, nursery stock)
- Heat Pump/AC Supply
- Community Non-Community
- Nursery Irrigation (retail outlets only)
- Heat Pump/AC Return
- Other Public Supply (HRS)
- Golf Course Irrigation
- Livestock
- Monitor (Describe Facility: WWT)
- Recreation Area Irrigation (ball fields, playgrounds)



3. Description of Facility: WWT  
 (whether residential, townhouse, condo, number of persons/units served, kind of business, etc.)

4. Application for: Abandonment  
 5. Casings: 2 Diameter 5 Approximate Depth  
 New Construction  Black Steel  PVC  
 Repair  Galvanized  Other (Specify) STAINLESS  
 Abandonment

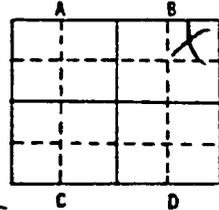
6. Pump Capacity 0 GPM  
 7. Well Depth 10 Feet  
 8. Screen: Length 5 Feet PVC  
 Slot Size 0.01  Stainless  
 9. Proposed Grouting Interval: 0 to 10'

10. Method of Construction: Rotary  Cable Tool  Combination  Auger CAAT Other

11. WWT - MAS PENS  
 Draw map of well location and indicate well site with "X". Identify known roads and landmarks, provide distances.

12. BL  
 County Subdivision Name, Lot, Block, Unit

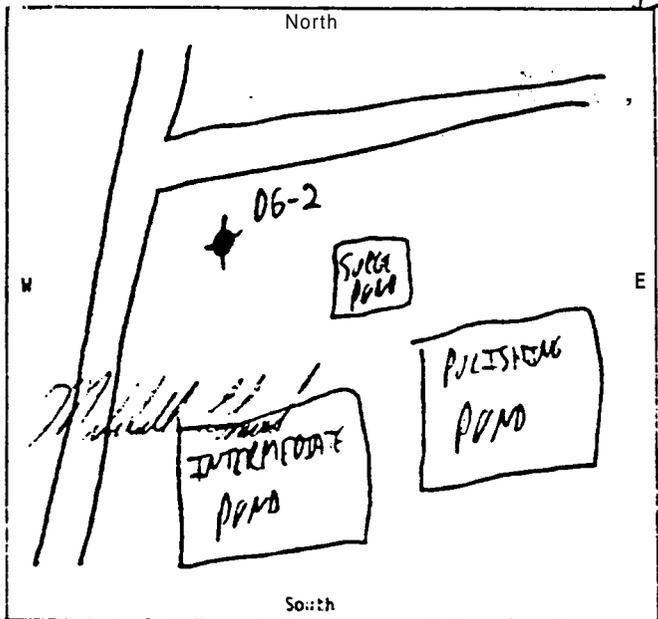
13. Quarter Section B  
 Indicate Well in Chart



14. Section Township Range  
1 35 30W

15. Minimum Distance from Septic Tank: \_\_\_\_\_ feet

16. On Cinch wells & larger: \_\_\_\_\_  
 Latitude Longitude



17. I HEREBY CERTIFY THAT I WILL COMPLY WITH THE RULES OF CHAPTER 40A-3, FLORIDA ADMINISTRATIVE CODE, AND THAT A WATER USE PERMIT OR ARTIFICIAL RECHARGE PERMIT, IF NEEDED, HAS OR WILL BE OBTAINED PRIOR TO COMMENCEMENT OF WELL CONSTRUCTION. I FURTHER CERTIFY THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS ACCURATE AND THAT I WILL OBTAIN NECESSARY APPROVAL FROM OTHER FEDERAL, STATE, OR LOCAL GOVERNMENTS, IF APPLICABLE. I AGREE TO PROVIDE A WELL COMPLETION REPORT TO THE DISTRICT WITHIN 15 DAYS OF EXPIRATION OF THE PERMIT.

Ralph Nuss (mes) 2491  
 Signature of Contractor License No.

18. I CERTIFY THAT I AM THE OWNER OF THE PROPERTY, THAT THE INFORMATION PROVIDED ON WELL LOCATION IS ACCURATE, AND THAT I AM AWARE OF MY RESPONSIBILITIES UNDER CHAPTER 373, FLORIDA STATUTES, TO MAINTAIN OR PROPERLY ABANDON THIS WELL; or, I CERTIFY THAT I AM THE AGENT FOR THE OWNER, THAT THE INFORMATION PROVIDED IS ACCURATE, AND THAT I HAVE INFORMED THE OWNER OF HIS RESPONSIBILITIES AS STATED ABOVE.

Fee Received: \$ NC Receipt No. \_\_\_\_\_ Check No. \_\_\_\_\_  
 Permit Number 8802453 CUP Application No. \_\_\_\_\_

Geologist Approval: \_\_\_\_\_  
 Signature, Authorized District Representative: [Signature] Date Granted: 2/23/88  
 PERMIT CONDITIONS:

OWNER OR AGENT'S SIGNATURE [Signature]

Contact the Florida Department of Environmental Regulation (DER) for information on applicable construction and siting standards. The construction of this monitoring well is required to meet the applicable standards of DER.

Marianna Field Office  
 300 Bell Street  
 Marianna, FL 32446  
 (904) 482-4017

**APPLICATION TO CONSTRUCT, REPAIR, OR ABANDON WELL**  
**NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT**  
 Route 1, Box 3100, Havana, Florida 32333 (904) 487-1770

FIGURE # 1  
 Pensacola Field Office  
 Room 203  
 160 Governmental Center  
 Pensacola, FL 32501  
 (904) 436-8465

TYPE OR PRINT IN BLACK INK

1. PUBLIC WORKS CENTER - NWS DEFS BUDG 3560 NWS DEFS. FL 32528 452-4315  
 OWNER, LEGAL NAME OF ENTITY IF CORPORATION ADDRESS ZIP TELEPHONE NUMBER

2. Check the Use of the Well

- Community  Non-Community
- Other Public supply (HRS)
- Monitor (Describe Facility): WWT
- Nursery stock
- Nursery Irrigation (retail outlets only)
- Golf Course Irrigation
- Recreation Area Irrigation (ball fields, playgrounds)
- Heat Pump/AC Return
- Livestock

good Management District  
 Test (temporary) RECEIVED

3. Description of Facility: WWT  
 (whether residential, townhouse, condo, number of persons/units served, kind of business, etc.)

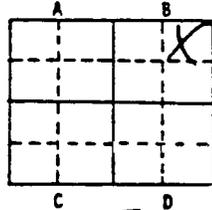
5

10. Method of Construction:  Rotary \*  Cable Tool

11. WWT - NWS DEFS  
 Well Location: Address, Road Name or Number

12. FLC  
 County Subdivision Name, Lot, Block, Unit

13. Quarter Section B  
 Indicate Well in Chart



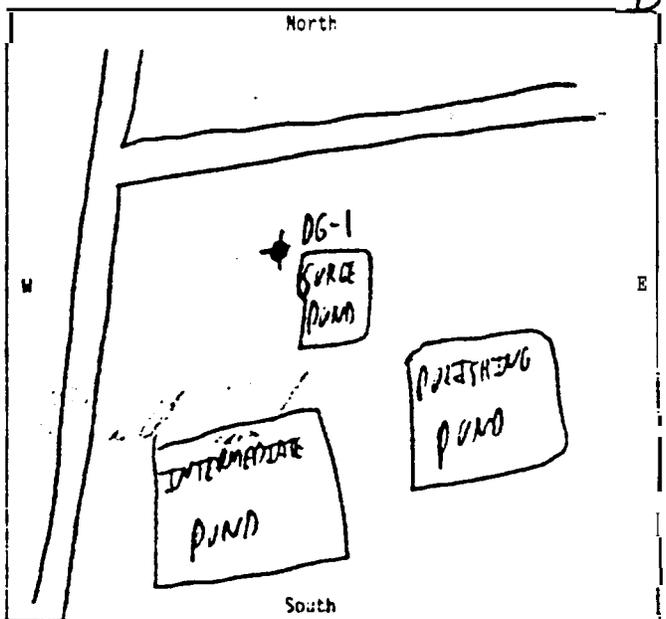
14. Section Township Range  
1 35 30W

15. Minimum Distance from Septic Tank: \_\_\_\_\_ feet

16. On 6-inch wells & larger: \_\_\_\_\_  
 Latitude Longitude

17. I HEREBY CERTIFY THAT I WILL COMPLY WITH THE RULES OF CHAPTER 40A-3, FLORIDA ADMINISTRATIVE CODE, AND THAT A WATER USE PERMIT OR ARTIFICIAL RECHARGE PERMIT, IF NEEDED, HAS OR WILL BE OBTAINED PRIOR TO COMMENCEMENT OF WELL CONSTRUCTION. I FURTHER CERTIFY THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS ACCURATE AND THAT I WILL OBTAIN NECESSARY APPROVAL FROM OTHER FEDERAL, STATE, OR LOCAL GOVERNMENTS, IF APPLICABLE. I AGREE TO PROVIDE A WELL COMPLETION REPORT TO THE DISTRICT WITHIN 15 DAYS OF EXPIRATION OF THE PERMIT.

Ralph Nault (Mrs) 2491  
 Signature of Contractor License No.



18. I CERTIFY THAT I AM THE OWNER OF THE PROPERTY, THAT THE INFORMATION PROVIDED ON WELL LOCATION IS ACCURATE, AND THAT I AM AWARE OF MY RESPONSIBILITIES UNDER CHAPTER 373, FLORIDA STATUTES, TO MAINTAIN OR PROPERLY ABANDON THIS WELL; or, I CERTIFY THAT I AM THE AGENT FOR THE OWNER, THAT THE INFORMATION PROVIDED IS ACCURATE, AND THAT I HAVE INFORMED THE OWNER OF HIS RESPONSIBILITIES AS STATED ABOVE.

Fee Received: \$ N/A Receipt No. \_\_\_\_\_ Check No. \_\_\_\_\_

Permit Number 8802451 DUP Application No. \_\_\_\_\_

Geologist Approval \_\_\_\_\_ OLP Permit No. \_\_\_\_\_ TP No. \_\_\_\_\_

OWNER OR AGENT'S SIGNATURE Middle

Signature, Authorized District Representative John Smith Date Granted 2/23/88

NWFWD Form No. 10 (Rev. 1/86)

PERMIT CONDITIONS:

Contact the Florida Department of Environmental Regulation (DER) for information on applicable construction and siting standards. The construction of this monitoring well is required to meet the applicable standards of DER.

Marianna Field Office  
300 Pelt Street  
Marianna, FL 32446  
(904) 482-4017

APPLICATION TO CONSTRUCT, REPAIR, OR ABANDON WELL

Pensacola Field Office  
Room M3  
160 Governmental Center  
Pensacola, FL 32501  
(904) 436-8465

NORTHWEST FLORIDA  
WATER MANAGEMENT DISTRICT

Route 1, Box 3100, Havana, Florida 32333 (904) 487-1770

TYPE OR PRINT IN BLACK INK

1. PUBLIC WORKS CENTER - NAS ARMS. BOX 3560 NAS PENS, FL. 32508 452-4315  
OWNER, LEGAL NAME OF ENTITY IF CORPORATION ADDRESS ZIP TELEPHONE NUMBER

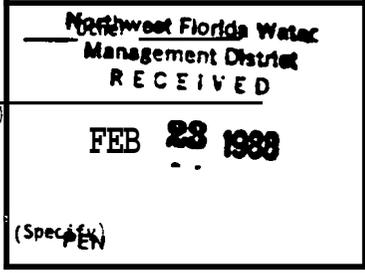
2. Check the Use of the Well

- Domestic (four dwellings or less)
- Landscape Irrigation
- Sanitation (restrooms)
- Aquaculture (fish ponds)
- Public Water Supply (DER)
- Agricultural Irrigation (crops, sod, orchards, nursery stock)
- Heat Pump/AC Supply
- Industrial (water used in manufacture of
- Community  Non-Community

WWTP  b1f Course Irrigation  Livestock  
 Recreation Area Irrigation (ball fields, playgrounds)

3. Description of Facility: WWTP  
(whether residential, townhouse, condo, number of persons/units served, kind of business, etc.)

4. Application for:  New Construction  Repair  
5. Crsina 2" Diameter  Black Steel  PVC  
37.5' Approximate  Galvanized  Other (Specify)



7. Well Depth 40 Feet Slot Size 0-01  Stainless Interval: \_\_\_\_\_ to \_\_\_\_\_

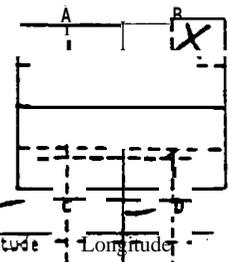
10. Method of Construction:  Rotary  Cable Tool  Combination  Auger  CRAW Other

11. WWTP - NAS ARMS  
Well Location: Address, Road Name or Number

Draw map of well location and indicate well site with "X". Identify known roads and landmarks, provide distances.

12. FLC County          Subdivision Name, Lot, Block, Unit

13. Quarter Section B  
Indicate Well in Chart



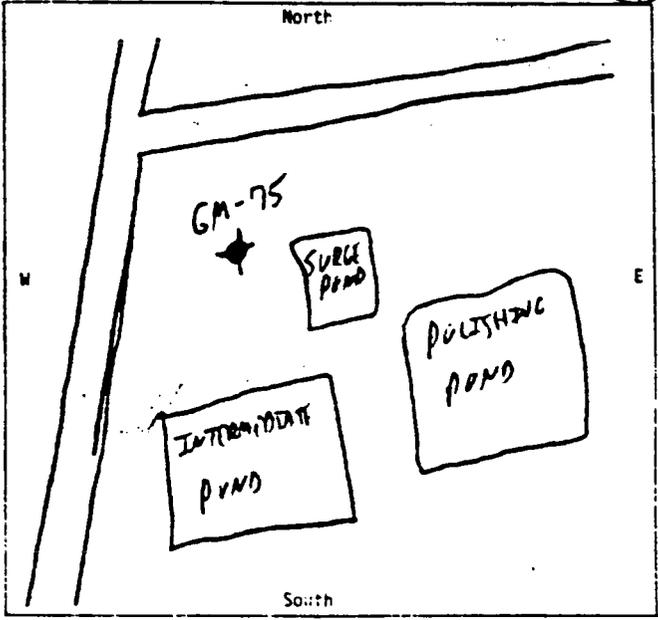
14. Section Township Range  
1 35 30W

15. Minimum Distance from Septic Tank: \_\_\_\_\_ feet

16. On 6-inch wells & larger: Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

17. I HEREBY CERTIFY THAT I WILL COMPLY WITH THE RULES OF CHAPTER 40A-3, FLORIDA ADMINISTRATIVE CODE, AND THAT I AM AWARE OF MY RESPONSIBILITIES UNDER CHAPTER 373, FLORIDA STATUTES, TO MAINTAIN OR PROPERLY ABANDON THIS WELL; or, I CERTIFY THAT I AM THE AGENT FOR THE OWNER, THAT THE INFORMATION PROVIDED IS ACCURATE, AND THAT I HAVE INFORMED THE OWNER OF HIS RESPONSIBILITIES AS STATED ABOVE.

Ralph Newby (MS) 2491  
Signature of Contractor License No.



18. I CERTIFY THAT I AM THE OWNER OF THE PROPERTY, THAT THE INFORMATION PROVIDED ON WELL LOCATION IS ACCURATE, AND THAT I AM AWARE OF MY RESPONSIBILITIES UNDER CHAPTER 373, FLORIDA STATUTES, TO MAINTAIN OR PROPERLY ABANDON THIS WELL; or, I CERTIFY THAT I AM THE AGENT FOR THE OWNER, THAT THE INFORMATION PROVIDED IS ACCURATE, AND THAT I HAVE INFORMED THE OWNER OF HIS RESPONSIBILITIES AS STATED ABOVE.

Fee Received: \$ N/A Receipt No. \_\_\_\_\_ Check No. \_\_\_\_\_  
Permit Number 802452 CUP Application No. \_\_\_\_\_

Geologist Approval \_\_\_\_\_ CUP Permit No. \_\_\_\_\_ TP No. \_\_\_\_\_

OWNER OR AGENT'S SIGNATURE Michael [Signature]

Signature, Authorized District Representative [Signature] Date Granted 2/23/88

NWFWD Form No. 10 (Rev. 1/86)

PERMIT CONDITIONS:

Contact the Florida Department of Environmental Regulation (DER) for information on applicable construction and siting standards. The construction of this monitoring well is required to meet the applicable standards of DER.

Marianna Field Office  
300 Pelt Street  
Marianna, FL 32446  
(904) 482-4017

**APPLICATION TO CONSTRUCT, REPAIR, OR ABANDON WELL**  
**NORTHWEST FLORIDA**  
**WATER MANAGEMENT DISTRICT**  
Route 1, Box 3100, Havana, Florida 32333 (904) 487-1770

Pensacola Field Office  
Room 203  
160 Governmental Center  
Pensacola, FL 32501  
(904) 436-8465

TYPE OR PRINT IN BLACK INK

1. PUBLIC WORK CENTER - MAS PENS. BLDG 3560 MAS. PENS. FL. 32508 452-4315  
OWNER, LEGAL NAME OF ENTITY IF CORPORATION ADDRESS ZIP TELEPHONE NUMBER

2. Check the Use of the Well

- Domestic (four dwellings or less)
- Landscape Irrigation
- Sanitation (restrooms)
- Aquaculture (fish ponds)
- Public Water Supply (DER)
- Agricultural Irrigation (crops, sod, orchards, nursery stock)
- Heat Pump/AC Supply
- Industrial (water used in manufacture of goods)
- Community Non-Community
- Nursery Irrigation (retail outlets only)
- Heat Pump/AC Return
- Other Public Supply (HRS)
- Golf Course Irrigation
- Livestock
- Monitor (Describe Facility): WWTWP
- Recreation Area Irrigation (ball fields, playgrounds)

Florida Water Management District  
**RECEIVED**  
**FEB 23 1988**  
PENSACOLA, FLORIDA

3. Description of Facility: WWTWP  
(whether residential, townhouse, condo, number of persons/units served, kind of business, etc.)

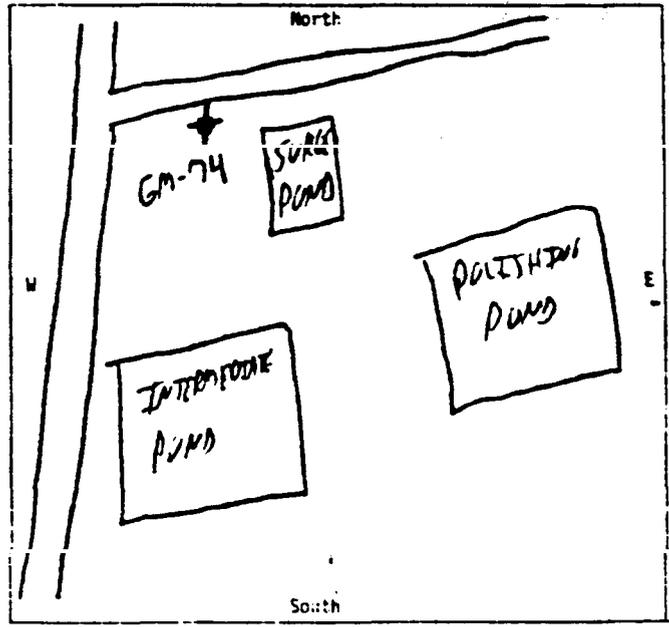
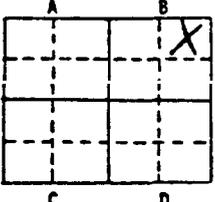
4. Application for:  New Construction  Repair  Abandonment  
5. Casings: 2 Diameter 62.5 Approximate Depth  
 Black Steel  PVC  Galvanized Other (Specify)

6. Pump Capacity 0 GPM  
7. Well Depth 65 Feet  
8. Screen: Length 2.5 Feet X PVC Slot Size 0.01  Stainless  
9. Proposed Grouting Interval: 0 to 65 to

10. Method of Construction: Rotary  Cable Tool  Combination  Auger GRWT Other

11. WWTWP - MAS PENS.  
Well Location: Address, Road Name or Number  
Draw map of well location and indicate well site with "X". Identify known roads and landmarks, provide distances.

12. Esc County Esc Subdivision Ham. Lot. Block. Unit  
13. Quarter Section B Indicate Well in Chart  
14. Section 1 Township 35 Range 30W  
15. Minimum Distance from Septic Tank: — feet  
16. On 6-inch wells & larger: Latitude Longitude



17. I HEREBY CERTIFY THAT I WILL COMPLY WITH THE RULES OF CHAPTER 40A-3, FLORIDA ADMINISTRATIVE CODE, AND THAT A WATER USE PERMIT OR ARTIFICIAL RECHARGE PERMIT, IF NEEDED, HAS OR WILL BE OBTAINED PRIOR TO COMMENCEMENT OF WELL CONSTRUCTION. I FURTHER CERTIFY THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS ACCURATE AND THAT I WILL OBTAIN NECESSARY APPROVAL FROM OTHER FEDERAL, STATE, OR LOCAL GOVERNMENTS, IF APPLICABLE. I AGREE TO PROVIDE A WELL COMPLETION REPORT TO THE DISTRICT WITHIN 15 DAYS OF EXPIRATION OF THE PERMIT.

Roland Nash (Mrs) 2491  
Signature of Contractor License No.

18. I CERTIFY THAT I AM THE OWNER OF THE PROPERTY, THAT THE INFORMATION PROVIDED ON WELL LOCATION IS ACCURATE, AND THAT I AM AWARE OF MY RESPONSIBILITIES UNDER CHAPTER 373, FLORIDA STATUTES, TO MAINTAIN OR PROPERLY ABANDON THIS WELL; or, I CERTIFY THAT I AM THE AGENT FOR THE OWNER, THAT THE INFORMATION PROVIDED IS ACCURATE, AND THAT I HAVE INFORMED THE OWNER OF HIS RESPONSIBILITIES AS STATED ABOVE.

OWNER OR AGENT'S SIGNATURE [Signature]

Fee Received: 5.00 Receipt No. NC Check No. —  
Permit Number 8802456 CUP Application No. —  
Geologist Approval [Signature] CUP Permit No. — TP No. —  
Signature, Authorized District Representative [Signature] Date Granted 2/23/88

NWFWD Form No. 10 (Rev. 1/86)

PERMIT CONDITIONS:  
Contact the Florida Department of Environmental Regulation (DER) for information on applicable construction and siting. Construction of this monitoring well is required to meet applicable standards of DER.

PERMIT NO. 8802452  Domestic  Member  
 Landscape  Other

NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT  
 WELL COMPLETION REPORT NEW DOMESTIC WELLS, 4 INCHES OR LESS

SEC 1 1/4 SEC B T 35 R 30W COUNTY ESCAMBIA  
 OWNER PUBLIC WORKS CENTER - NWS APTS ADDRESS BLDG 3560 NWS APTS 32508  
 CASING SIZE 2" CASING TYPE STAINLESS CASING DEPTH 5'  
 TOTAL DEPTH 10' GROUT AMT. (94 lb. bags) 2 GROUT 0 TO 10'  
 STATIC WATER LEVEL \_\_\_\_\_ TYPE PUMP \_\_\_\_\_ INTERVAL: \_\_\_\_\_ TO \_\_\_\_\_  
 WELL FINISH: OPEN HOLE \_\_\_\_\_ SCREENED \_\_\_\_\_ OTHER \_\_\_\_\_  
 LICENSE HOLDER SIGNATURE: Richard Neuh (MIS)  
 LICENSE NUMBER: 2491 DATE 2/24/88  
 COMMENTS: WELL GROUTED W/ TRUSS PIPE FROM BOTTOM TO TOP

\_\_\_\_\_ Construction \_\_\_\_\_ Permit \_\_\_\_\_  
 \_\_\_\_\_ Repair \_\_\_\_\_  
 NFWMD Form No. 70  Abandonment \_\_\_\_\_ Conditions: \_\_\_\_\_

PERMIT NO. 8802453  Domestic  Member  
 Landscape  Other

NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT  
 WELL COMPLETION REPORT NEW DOMESTIC WELLS, 4 INCHES OR LESS

SEC 1 1/4 SEC B T 35 R 30W COUNTY ESCAMBIA  
 OWNER PUBLIC WORKS CENTER - NWS APTS ADDRESS BLDG 3560 NWS APTS FL 32508  
 CASING SIZE 2" CASING TYPE STAINLESS CASING DEPTH 5'  
 TOTAL DEPTH 10' GROUT AMT. (94 lb. bags) 2 GROUT 0 TO 10'  
 STATIC WATER LEVEL \_\_\_\_\_ TYPE PUMP \_\_\_\_\_ INTERVAL: \_\_\_\_\_ TO \_\_\_\_\_  
 WELL FINISH: OPEN HOLE \_\_\_\_\_ SCREENED \_\_\_\_\_ OTHER \_\_\_\_\_  
 LICENSE HOLDER SIGNATURE: Richard Neuh (MIS)  
 LICENSE NUMBER: 2491 DATE 2/24/88  
 COMMENTS: WELL GROUTED W/ TRUSS PIPE FROM BOTTOM TO TOP

\_\_\_\_\_ Construction \_\_\_\_\_ Permit \_\_\_\_\_  
 \_\_\_\_\_ Repair \_\_\_\_\_  
 NFWMD Form No. 70  Abandonment \_\_\_\_\_ Conditions: \_\_\_\_\_

PERMIT NO. 8802454  Domestic  Member  
 Landscape  Other

NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT  
 WELL COMPLETION REPORT NEW DOMESTIC WELLS, 4 INCHES OR LESS

SEC 1 1/4 SEC B T 35 R 30W COUNTY ESCAMBIA  
 OWNER PUBLIC WORKS CENTER - NWS APTS ADDRESS BLDG 3560 NWS APTS FL 32508  
 CASING SIZE 2" CASING TYPE STAINLESS CASING DEPTH 5'  
 TOTAL DEPTH 10' GROUT AMT. (94 lb. bags) 2 GROUT 0 TO 10'  
 STATIC WATER LEVEL \_\_\_\_\_ TYPE PUMP \_\_\_\_\_ INTERVAL: \_\_\_\_\_ TO \_\_\_\_\_  
 WELL FINISH: OPEN HOLE \_\_\_\_\_ SCREENED \_\_\_\_\_ OTHER \_\_\_\_\_  
 LICENSE HOLDER SIGNATURE: Richard Neuh (MIS)  
 LICENSE NUMBER: 2491 DATE 2/24/88  
 COMMENTS: WELL GROUTED W/ TRUSS PIPE FROM BOTTOM TO TOP

\_\_\_\_\_ Construction \_\_\_\_\_ Permit \_\_\_\_\_  
 \_\_\_\_\_ Repair \_\_\_\_\_  
 NFWMD Form No. 70  Abandonment \_\_\_\_\_ Conditions: \_\_\_\_\_

PERMIT NO. 8802455  Domestic   Member  
 Landscape  Other

NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT  
WELL COMPLETION REPORT NEW DOMESTIC WELLS, 4 INCHES OR LESS

SEC 1 1/4 SEC B T 35 R 30W COUNTY ESCAMPA  
OWNER PUBLIC WORKS CENTER - NWS AENS ADDRESS BOX 3560 NWS AENS FL. 32508  
CASING SIZE 2" CASING TYPE PVC CASING DEPTH 37.5'  
TOTAL DEPTH 40' GROUT AMT. (94 lb. bags) 3 GROUT 0 TO 40'  
STATIC WATER LEVEL \_\_\_\_\_ TYPE PUMP \_\_\_\_\_ INTERVAL: \_\_\_\_\_ TO \_\_\_\_\_  
WELL FINISH: OPEN HOLE \_\_\_\_\_ SCREENED \_\_\_\_\_ OTHER \_\_\_\_\_  
LICENSE HOLDER SIGNATURE: Ralph Nix (MIS)  
LICENSE NUMBER: 2491 DATE 2/24/89  
COMMENTS: WELL GROUTED W/ TREMIE PIPE FROM BOTTOM TO TOP

\_\_\_\_\_ Construction \_\_\_\_\_ Permit \_\_\_\_\_  
 Repair \_\_\_\_\_  
 Abandonment \_\_\_\_\_ Conditions: \_\_\_\_\_

NWFWM Form No. 70

PERMIT NO. 8802456  Domestic   Member  
 Landscape  Other

NORTHWEST FLORIDA WATER MANAGEMENT DISTRICT  
WELL COMPLETION REPORT NEW DOMESTIC WELLS, 4 INCHES OR LESS

SEC 1 1/4 SEC B T 35 R 30W COUNTY ESCAMPA  
OWNER PUBLIC WORKS CENTER - NWS AENS ADDRESS BOX 3560 NWS AENS FL. 32508  
CASING SIZE 2" CASING TYPE PVC CASING DEPTH 62.5'  
TOTAL DEPTH 65' GROUT AMT. (94 lb. bags) 3 GROUT 0 TO 65'  
STATIC WATER LEVEL \_\_\_\_\_ TYPE PUMP \_\_\_\_\_ INTERVAL: \_\_\_\_\_ TO \_\_\_\_\_  
WELL FINISH: OPEN HOLE \_\_\_\_\_ SCREENED \_\_\_\_\_ OTHER \_\_\_\_\_  
LICENSE HOLDER SIGNATURE: Ralph Nix (MIS)  
LICENSE NUMBER: 2491 DATE 2/24/89  
COMMENTS: WELL GROUTED W/ TREMIE PIPE FROM BOTTOM TO TOP

\_\_\_\_\_ Construction \_\_\_\_\_ Permit \_\_\_\_\_  
 Repair \_\_\_\_\_  
 Abandonment \_\_\_\_\_ Conditions: \_\_\_\_\_

NWFWM Form No. 70